

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 12, 2002 8:00 am**  
**Secretary of State**

05-12-2002 90846 001 \*\*\*\*\*8.75  
 05-12-2002 90846 002 \*\*\*150.00

**DOCUMENT # L33053**

**1. Entity Name**  
**ERICKSON REALTY, INC.**

**Principal Place of Business**

**8695 COLLEGE PKWY**  
**SUITE 300**  
**FORT MYERS FL 33919-889**  
**US**

**Mailing Address**

**8695 COLLEGE PKWY**  
**SUITE 300**  
**FORT MYERS FL 33919-889**  
**US**

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**4. FEI Number**

**65-0159013**

Applied For

Not Applicable

Zip

Country

Zip

Country

**33919-5807**

**33919-5807**

**5. Certificate of Status Desired**

☒

**\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**ERICKSON, DONALD I.**  
**8695 COLLEGE PKWY**  
**SUITE 300**  
**FT. MYERS FL 33919**

Name

**Peter A. Gargano, Jr.**

Street Address (P.O. Box Number is Not Acceptable)

**1338 Woodmere Lane**

City

**Fort Myers,**

**FL**

Zip Code  
**33919**

**8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.**

SIGNATURE

*Peter A. Gargano, Jr.*

**Peter A. Gargano, Jr April, 25, 2002**

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.**  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

**10. Election Campaign Financing**  
 Trust Fund Contribution. ☐

**\$5.00 May Be Added to Fees**

**11. OFFICERS AND DIRECTORS**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE **PSD** ☒ Delete  
 NAME **ERICKSON, DONALD I.**  
 STREET ADDRESS **9268 CORAL ISLE WAY**  
 CITY-ST-ZIP **FORT MYERS FL**

TITLE **PSTD** ☒ Change ☐ Addition  
 NAME **Peter A. Gargano, Jr.**  
 STREET ADDRESS **1338 Woodmere Lane**  
 CITY-ST-ZIP **Fort Myers, FL 33919**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
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TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

**13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE**

*Peter A. Gargano, Jr.* **Peter A. Gargano, Jr. 4/25/02 (239) 274-3030**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)